❄WIRRAL

WIRRAL PLACE BASED PARTNERSHIP BOARD

27th July 2023

REPORT TITLE:	UNSCHEDULED CARE IMPROVEMENT PROGRAMME UPDATE
REPORT OF:	JANELLE HOLMES, CEO WIRRAL UNIVERSITY TEACHING HOSPITAL

REPORT SUMMARY

The Unscheduled Care Improvement Programme continues to make significant progress in delivery of the key programme milestones across its 5 workstreams with the aim of improving urgent and emergency care services in Wirral. The sentinel measure of the programme success is a sustained reduction in the No Criteria to Reside (NCTR) numbers where the Wirral system has been a national & regional outlier for a significant period. This has brought with it national NHS & local authority leadership scrutiny and an expectation for improvement. This report provides the Board with evidence of that improvement to date and assurance of the decision of endorsement of the programme presented at the May meeting.

Analysis of data throughout May and June shows a 'statistically significant' reduction in the number of hospital inpatients with NCTR (sentinel measure). In direct correlation with the improvement of the NCTR position, statistically significant improvement is also being seen in the length of Stay of both 14 & 21 days. The NCTR number has reduced from 217 in May to 166 in June. At the start of the programme this number averaged 270 and Wirral was an outlier nationally with 30% of its acute hospital bed based occupied by patients who needed care outside of hospital compared to a national average of 18%. This improved position has moved Wirral place from 8th (bottom) position in the Cheshire & Mersey ICS to 4th position.

This improvement is directly related to the establishment of the Transfer of Care Hub-Discharge and the 'test of change' undertaken in April. This test of change saw the establishment of a 'single hospital led' leadership team aligned to the pre-arranged transfer of adult social care responsibilities back to the Local Authority. Close working between both teams has ensured the success of the new model to support the smooth transfer of adult social care staff back to the Local Authority. In addition, all other programme workstreams have met their milestones this month with the anticipated benefits of Home First, Care Market Sufficiency & Reablement creating further improvements to the NCTR numbers as they 'go live' later in the year.

RECOMMENDATION

It is recommended that the Wirral Place Based Partnership Board notes the update.

**SUPPORTING INFORMATION**

1.0   REASON FOR RECOMMENDATION

1.1   This report is to provide the Board with information and assurance on the work of the Unscheduled Care Improvement Programme for Wirral.

2.0   OTHER OPTIONS CONSIDERED

2.1   No other option has been considered as the report is at the request of the Board.

3.0   BACKGROUND INFORMATION

3.1   Since the Wirral Place Based Partnership Board (WPBPB) meeting on the 22nd June 2023, programme delivery has been progressing within the refreshed Unscheduled Care Improvement Programme approach, endorsed at the last meeting.

3.2   Transfer of Care Hub - Discharge: There has been a significant amount of work undertaken this month, including redesigning of operational processes and patient pathways, improving engagement and collaboration with partner organisations, and establishing more clearly defined operational and clinical governance arrangements. At the time of writing everything is in place for the go-live of the new Transfer of Care Hub - Discharge on the 1st July. This coincides with Adult Social Care staff transferring back to the Council and the establishment of a single leadership structure for hospital discharge. The focus is now shifting to delivery of the medium-term objectives, which include developing detailed Standard Operating Procedures for all processes, roles and responsibilities, establishing an electronic transfer of care form to improve the assessment of patients and improving the time between the patient having no criteria to reside and discharge from hospital. These will all contribute to a more effective way of working, improved performance and improved patient experience and outcomes along with improving Wirral's performance against the NCTR metrics, given pre-April 2023 Wirral was a regional and national outlier in this area. The improvements against the no criteria to reside and long length of stay metrics are detailed in the graphs below:
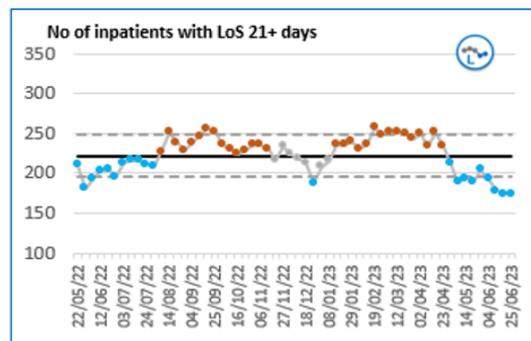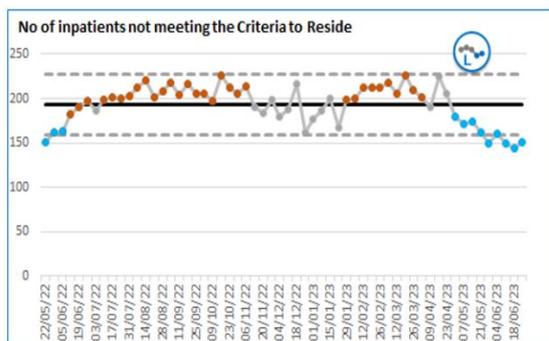
3.3   Two enabling workstreams have been established to support the implementation of the programme and individual projects. Both enabling workstreams report into the Urgent and Emergency Care (UEC) Programme Board.

3.4 Finance, Contracts and Commissioning Enabling Workstream Group (FCC Group): This group has been established to ensure that budget and commissioning intentions are aligned to well understood capacity and demand requirements and support the transformation work. The workstream is led by the Wirral Place Director and includes representatives from all partner organisations.

3.5 Workforce Enabling Programme Group: The objective of this group is to develop a joined-up and sustainable workforce plan because many of the delivery projects include a strong reliance of having a robust and sustainable workforce. The group was established following the recognition that there is a potential for Wirral partners to work together smarter when planning and designing our unscheduled care workforce, especially during times of scaling up teams. The group is being led by one of the partner Directors of Human Resources and has input from all partner organisations.

3.6 Progress against the programme and project metrics for the month of June:

- Programme Headline Metric: No Criteria to Reside (NCTR). This metric is captured as a snapshot on the first of every month. June's data shows an improvement from May (167 NCTR patients on 1st June compared to 179 NCTR patients on 1st May).
- As a direct consequence of the improvement of the NCTR position, improvement is being seen in other key indicators. Long length of Stay for patients who have resided in a bed for over 14 and 21 days has seen a notable reduction from 217 in May to 166 in June.

3.7 Supporting Metrics. Supporting metrics are managed at a project level. Each of the five supporting projects must be able to measure progress against one or more metrics which, if achieved, will result in an improvement to the headline metric.

3.8 Care Market Sufficiency. The care market sufficiency project aims to increase the capacity in the domiciliary care market. The aim by the end of the project is to increase the overall number of hours provided by domiciliary care by 14%. Additionally, the project aims to increase the number of people accepted into domiciliary care by 10% Performance data for May 2023 shows that performance is exceeding the target for the overall number of new hours picked up whilst the data for the number of new packages accepted is slightly below target.

3.9 Virtual Wards. The Virtual Ward project aims to double throughput on its virtual frailty ward and to increase throughput on the respiratory virtual ward by 200. Data for May shows that both target trajectories have not yet been achieved. This is due to recruitment and the seasonality of demand. The workstream has been asked to realign its trajectories to the workforce recruitment timescales and seasonality.

3.10 The Home First service is undergoing a large-scale expansion to its core staff base. As such, it aims to increase the number of patient referrals accepted by the service by 215% with 88% of the patients referred into the service will be from the acute hospital Performance for May shows that, overall, the service is on track with the increase in referrals accepted. May data shows that whilst referrals accepted from

hospital are slightly ahead of plan these are outweighed by the CICC pick-ups. The workstream has been requested to realign the capacity to the NCTR patients.

3.11 Wirral Reablement service are on track to agree the project level metrics. The Community Reablement Target Operating Model was endorsed at Adult Social Care and Public Health Committee on 13th June and the WPBPB meeting on the 22nd June 2023. This project is now moving into implementation phase following the endorsement of the model.

4.0 FINANCIAL IMPLICATIONS

4.1 Patients who remain in hospital with NCTR are a significant financial impact on the Wirral system. Having a programme that is focussed on moving people into services that provide the right type of care will bring about non-cashable efficiencies and improve quality and safety.

5.0 LEGAL IMPLICATIONS

5.1 There are no legal implications directly arising from this report.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

6.1 N/A

7.0 RELEVANT RISKS

7.1 There is a risk that the projects will not be delivered in time due to availability of health and care staff, which will need to be recruited to support increased activity levels. This risk is being managed by the workforce leads across Wirral, who are actively monitoring recruitment levels against the trajectory and are actively seeking out innovative recruitment practices to help attract more people into the professions.

8.0 ENGAGEMENT/CONSULTATION

8.1 Weekly meetings are taking place within each of the individual project teams, to ensure that progress is being tracked and that stakeholders are engaged.

8.2 A weekly senior operational managers group is in place to review and manage the many co-dependencies between the projects.

8.3 A monthly Programme Board is in place to provide a point of escalation from the projects and to unblock issues.

8.4 A fortnightly SRO meeting is in place with the senior leads from each workstream.

9.0 EQUALITY IMPLICATIONS

9.1 All projects will give due regard to equality implications and will complete an equality impact assessment where needed.

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

10.1 There are no environment and climate implications from the report.

11.0 COMMUNITY WEALTH IMPLICATIONS

11.1 Recruitment programmes are actively seeking to recruit Wirral residents.

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APPENDICES

Appendix 1 – Unscheduled care programme highlight report 21.06.23
Appendix 2 – C&M report for NCTR

BACKGROUND PAPERS

Cheshire and Merseyside long length of stay report

SUBJECT HISTORY (last 3 years)

Council Meeting	Date